Public health programs

A SHORT HISTORY OF THE PHYSICAL EXAMINATION PROGRAM FOR IMPORTED WORKERS, 1942-1951

Background

Immediately preceding and during the first year of World War II heavy demands for labor in the war industries, as well as in the armed services, resulted in acute labor shortages in other fields of employment, especially agriculture. As early as 1941, industrial and agricultural employers affected by these shortages requested assistance from the Federal Government through "adjustments of the immigration act."[1] In 1942, after urgent appeals from such groups, the U.S. Government negotiated an agreement with the government of Mexico providing for the emergency wartime importation of Mexican Nationals. This agreement later was supplemented by Public Law 45 of April 1943 and its subsequent amendments. Ih addition to Mexico, the lawas provided for the importation of foreign labor from Jamaica, British Honduras, the Bahamas Islands, Barbados, and Newfoundland.

Pertinent agreements were negotiated between the Government of the United States and the governments of the aforementioned countries. Recruitment programs were jointly planned and carried out in accordance with these agreements. The Farm Security Administration and the War Manpower Commission were originally designated as the responsible governmental agencies for foreign agricultural labor and foreign industrial labor, respectively. Farm Security Administration functions were transferred to the War Food Administration, Office of Labor in 1943, and from there in 1945, directly to the Office of the Secretary of Agriculture, where they remained until 1947.

The conduct of these programs also required the active participation of a number of federal agencies as well as of state and local groups. The Public Health Service, by request, assumed responsibility for the initial physical examination of rebruits, a function derived from its medical responsibilities in the immigration program.

War emergency foreign agricultural labor recruitment programs were completed at the end of 1947 with the expiration of pertinent legislation. However, the importation of foreign labor has continued, and in 1949 was "much bigger than the maximum of the wartime emergency."[4] Between 1947 and 1951, the legal authority for the importation of foreign laborers was the statutory authorization in the ninth proviso to section 3 of the 1917 Immigration Law. For Mexican,s this has been supplemented by a series of international executive agreements and Public Law 78 of July 1951. For laborers from the British West Indies work contracts have been negotiated directly between private employers in the United States and the Island governments or their agents.

All imported foreign laborers were examined by Public Health Service personnel before they entered the United States. Both during and since the war years, teams of Public Health Service physicians and technicians were sent to sources of labor recruitment in Mexico, the West Indies and Newfoundland where they conducted physical examination programs in cooperation with local health authorities. Laborers imported from other areas as well as some of those from the aforementioned countries were examined at a port of entry into the U.S.

Most employees assigned to this program were detailed from the Division of Foreign Quarantine. However, medical officers and techinicians from the Divisions of Tuberculosis and Venereal Disease Control also participated in specialized phases and pharmacist mates on detail from the Navy were even used on some projects. Assignments usually were made for the duration of specific recruitment projects and typically lasted for periods of from one to three months. Medical officers sent to Mexico, frequently, remained for longer periods.

In general the physical examination procedure was patterned after traditional immigration medical examination. The procedure was modified and adapted to available facilities and to some extent to the general health conditions prevalant in the country involved. Examinations covered skin conditions, venereal disease, heart and lungs, dental conditions, eye, ear, nose and throat, blood pressure, and general skeletal, muscular and nervous systems. Most persons examined were vaccinated or revaccinated for smallpox and given initial typhoid inoculations. Photoflurographic chest x-rays and serological tests for syphilis were given to some, as facilities permitted.

General Note

For convenience the data included in this report have been divided into two periods - the war period (1942-47) and the post war period (1947 to date). During the year 1947 most of the war time recruting programs were terminated and post war programs were initiated. Available reports, generally, follow this pattern. For each of the above periods, materials are presented by country of origin of the foreign laborers.

Basic sourncess of information were:

1. A History of the Emergency Farm Labor Supply Program, 1943-47, by Wayne D. Rasmussen (Agriculture Mimograph No. 13) Sept. 1951
2. Mexican Nationals Brought In for Railroad Track Labor - A Temporary War Emergency Measure, 1943-46, Prepared by the Rural Industrial and Migratory Labor Section, Office of Operations, U.S. Employment Service - June 1946.
3. The Health Services Program in Operation - Wayne D. Rasmussen and Lester Rindler (Unpublished Manuscript of Bureau of Agriculture Economics - 1947)
4. Migratory Labor in American Agriculture - Report of the President's Commission on Migratory Labor - 1951.
5. Official Correspondence of the Public Health Service, the Farm Security Administration, the War Food Administration, and the War Manpower Commission.
6. Public Health and Medical Services for Migratory Farm Workers - PH Report 60:233-234 (1945).

Reporting procedures were not standardized and reports submitted varied in completeness. Several are attached.

There is a slightdiscrepancy between references 1 and 3 in the numbers of workers imported, but this is understandable as reference 3 was not an officialy published document. Accordingly totals used in this report for agricultural workers recruited in wartime programs all were taken from reference 1. Percentages of rejections and total number of persons examined are from references 3.

Wartime Period 1942-1947

Public Health Service physical examination programs during the eary part of this period were characterized by emergency operations and procedures. Personnel and facilities initially were detached from Foreign Quarantine field stations and examination procedures were not standardized. Medical officers and technicians from the Venereal Disease and Tuberculosis Control Divisions were assigned to the program shortly after its start.

As experience was gained, staffing and organizational patterns as well as operational procedures became established, but in general, activities were always flexible enough to meet changing conditions. As facilities were available, serological tests for syphilis and chest X-rays were given. The maintenance of specialized X-ray equipment in particular was a problem.

In order to meet recruitment needs, certain standards, i.e., blood pressure readings, were lowered. However, standards never were changed with respect to the major communicable or contagious diseases, and all persons with, or suspected of having, such conditions were rejected.

As might be expected, public reaction from the importation of so many foreign workers was varied. In many places their contribution to the war effort was fully appreciated and they made a satisfactory adjustment in the locality. However, in other places, State, local and private groups were concerned about the danger of importing and transmitting disease. All reported cases were investigated thoroughly. Most of the cases did not have the disease reported and the few that did were isolated immediately. A public statement on the scope of the physical examination program was made to explain the precautions taken by the Government to prevent the introduction of disease.

Individual physical examination programs in the various countries were as follows:

Mexico:

Workers were recruited in Mexico from September 1942 until May 1947. Approximately 250,000 candidates for the agricultural labor program were examined during this period, of which approximately 220,000 were sent to the United States. Approximately 12 percent of the total were rejected for physical reasons or if accepted, did not come to the United States.

No information was located on the number of track labor candidates examined, but approximately 136,000 were sent to the United States.

The physical examination program consisted of a clinical examination, a chest X-ray for most candidates and serological tests for syphilis for all suspected cases as well as for certain others. A description of the examination procedure as carried out in 1943 is attached.

The most common cause of rejection were pediculosis and dental caries. Candidates with such conditions usually received pertinent treatment, i.e., delousing and dental care, and then were reexamined. Most were accepted on the second examination. A dental officer was assigned to the Public Health Service team for part of this period and he made the dental examinations (refererene 3). Other important causes of rejection were pulmonary tuberculosis and other lung pathology, hernia, varicose veins, diseases of the heart, disease of the eye, urethral discharge, hemorrhoids, pyorrhea, and inguinal scars.

During the early war years, all examinations were made in Mexico City, D.F. From 1944 until 1947 examinations were also conducted in some provinces as well as in Mexico City. As reference 3 points out, this had some effect on the relative importance of causes of rejection as there was a far higher proportion of physical defects in the village and rural areas.

Available statistics for the program are as follows:

	Agricultural workers				Track laborers
	No. Examined	No. Rejected	Percent of Rejection	No. admitted to U.S.	No. admited to U.S.
1942				4,189	
1943	56,700	6,100	11	52,131	24,783
1944	70,000	7,500	11	62,091	55,354
1945	57,000	5,100	9	49,457	
1946	37,700	4,800	13	32,046	55,953
1947(thru May 30)	24,100	3,800	17	19,632	

Bahamas Islands:

Agricultural workers were recruited in these islands from 1943 through 1947. During the first few years, the physical examination was made in Nassau, but serological tests and X-rays were made when the workers arrived in Miami. This was necessary because X-ray equipment and laboratory facilities were not available in the islands.

Reference 3 indicates that the highest percentage of rejections were for hypertension, urethritis and deficient teeth. In order to meet recruitment quotas at certain times, candidates with urethritis were treated with penicillin and the minimum standards of blood pressure were relaxed.

A report of an X-ray survey made in Miami of 525 persons from the Bahamas Islands disclosed one person with minimal tuberculosis and eight with other lung pathology. These last named were not rejected.

Approximately 20,000 West Indians were recruited between 1944 and 1946 for the track labor program, but no information was found on the number examined, percentage of rejections and causes of rejection. Some Bahamians were in this group.

Available statistical data on the program is as follows:

Year	No. Examined	No. Rejected	Percent of Rejection	No. admitted to U.S.
1943	5,900	600	10	4,698
1944				3,048
1945	3,400	1,300	38	2,100
1946	3,500	700	20	2,690
1947	2,900	300	10	2,705

Jamaica:

Jamaicans were recruited for agricultural and track labor from 1943 through 1947. Examinations were made in Jamaicsa by Public Health Service personnel. Serological tests and chest X-rays were made as facilities were available. The percentage of rejections was much higher than among Mexican which is believed to be the result of selection procedures by Mexican officials before candidates were referred for medical examination.

The principal causes of rejection were urethral discharge, over- and under-weight, dental disease, skin disease, pyrexia and hypertension. A report for the period July 5 throught July 17 1943 states that 1,249 persons were examined and 121 of them (9 1/2 percent) were rejected. Another report for a month in May and June 1944 states that 9,115 persons were examined and 3,392 (33 percent) rejected. A complete report is available for one week of this period (May 29 through June 4), when 3,348 persons were examined and 1,560 (46.5 percent) rejected. Among the principal causes of rejection were urethral discharge (544 cases), hypertension (227 cases), nutritional conditions (116 cases), yaws (111 cases), inguinal hernia (90 cases), valvular heart disease (90 cases), Balanitis paraphimosis (61 cases), penile lesions (34 cases), tuberculosis (26 cases), and umbilical hernia (23 cases).

Avaialable statistical data:

Agricultural Workers

Year	No. Examined	No. Rejected	Percent of Rejections	No. admitted to U.S.
1943	11,900	2,400	20	8,828
1944	27,400	9,200	33	15,666
1945	34,000	14,000	41	17,291
1946	17,000	9,200	54	7,796
1947				1,017

The percentage of rejections rose considerably each year. It is believed that this is the result of more complete examination for evidence of venereal disease. In 1944, only 4,000 of the applicants were given serological examinations; in 1945, 20,000 were so examined and even a larger percentage was given serological tests in 1946.

Barbados:

Agricultural workers were recruited from Barbados in 1944 and in 1946. Nine hundred and eight were recruited the first year. The examination indluced a serological test for shyphilis and urinalysis as well as chest X-rays for about a third of the workers.

In 1946, 5,100 workers were examined with 1,600 rejections (31 percent). Three thousand and eighty-seven were sent to the United States. The examination that year did not include chest X-rays, serological tests or urinalysis. Rejections were principally for defective teeth and substandard weight. All Barbadions accepted were given sulfanomide prophylaxis agains meningococcii meningitis.

British Honduras:

Very little information was located with regard to workers recruited from this country. From available sources of information it is believed that examinations in 1944 were made by PHS Medical Officer and in 1945 by local physicians. Approximately 1,250 workers were recruited in 1945. Nothing was found with respect to the percentage of rejections, the principal causes of rejection, or the type of examination given.

Newfoundland:

Workers from Newfoundland were recruited in 1944 and 1945 for work on dairy farms. The Public Health Service made arrangement for the U.S. Army to perform the physical examinations on Army posts. Examinations included bacterial cultures of the throat as well as standard procedures. These special examinations were made because standards for dairy workers are very high due to the hazards of milk-borne disease.

In 1944, 1,900 persons were examined with 300 rejected for medical reasons. Six hundred were examined in 1945 and approximately 100 of these were rejected. Lung pathology, hernia, syphilis, urinary pathology, skin diseases, defective vision, and hypertension were the main causes of rejections.

Post War Period 1947-1950

During the years 1947 through 1950 it has been estimated that 345,000 foreign agricultural workers have been imported into the United States. Approximately 315 thousand were from Mexico and the remainder from the British West Indies. The Mexican group included large numbers of "wetbacks" whose status was legalized through an agreement with the Mexican government.

The Report of the President's Commission on Migratory Labor gives the following estimated statistics on the numbers of foreign agricultural workers admitted from 1947 through 1950:

Year	Mexicans	British West Indies	Total
1947	86,331	9,553	95,884
1948	37,331	6,055	43,386
1949	100,476	8,176	108,652
1950	90,005	4,394	94,399
			342,321
			22,232

The figures given for 1947 probably include workers recruited in wartime programs which ended in ~~April~~ May 1947 as well as those recruited in post war programs.

Mexican laborers were examined in Mexico, in 1948 and in both the United States and Mexico in 1949, 1950 and the first half of 1951. Physical examinations in Mexico were made by Mexican physicians and vaccinations were given by Mexican Nurses. X-ray equipment was available only at one place in the first half of 1951. All of these procedures were supervised by Public Health Service Medical Officers. Examinations were "relatively thorough and complete" "including examination of the heart and lungs with a stethoscope." "Rejections were made for all Class A conditions encountered, all injections and communicable disease and various diseas and physical defects which would obviously interfere with satisfactory performance of work or might require prolonged treatment in the United States."

Examinations in the United States in 1949 and 1950 were made by specially trained sanitary inspectors under the supervision of a Public Health Service medical officer. These examinations were similar to those made in Mexico except that "examination of the heart and lungs was done only when deemed necessary." Sanitary inspectors also vaccinated.

In July 1951, a new agreement was negotiated with the Mexican government. Processing centers were set-up in Mexico and Public Health Service medical officers and technicians as well as X-ray qeuipment were sent to these centers. Narrative reports on the program are not available as yet but statistical reports for the six months period July 1, 1951, through December 31, 1951, are attached.

Information on examinations of West Indian laborers imported since 1947 is not available. These workers who averaged between approximately 5 to 10 thousand a year from 1947 - 1950 probably were examined through the regular immigration examination procedure at Foreign Quarantine stations in the Continental United States.